

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Batasan Hills, Quezon City

TWENTIETH CONGRESS
First Regular Session

House Bill No. 6264



Introduced by Abang Lingkod Party-list Representative
Manuel "Manman" O. Ko

EXPLANATORY NOTE

Sexual assault remains one of the most underreported and under-prosecuted crimes in the Philippines, with a key reason being the pervasive lack of timely forensic evidence collection. This critical failure stems from the reality that many hospitals, particularly in provinces and districts, do not have rape kits or trained personnel to conduct proper medico-legal examinations.

Although Republic Act No. 8505, the Rape Victim Assistance and Protection Act of 1998, mandates the establishment of rape crisis centers in every province and city, its inconsistent implementation is precisely what perpetuates this crisis. Reports from the Department of Health (DOH) confirm that many hospitals lack the necessary forensic tools, often resulting in victims being referred to faraway facilities, which causes delay, re-traumatization, and critical loss of evidence.

Therefore, this proposed measure seeks to strengthen and operationalize these existing mandates by requiring the regular availability, accessibility, and utilization of rape kits in all government hospitals and accredited facilities, supplemented by a clear accountability and reporting mechanism.

By establishing an integrated and well-funded system under the Department of Health, this Act will ensure that every victim of sexual assault, regardless of location or socioeconomic status, has immediate, free, and confidential access to evidence collection, medical attention, and psychological support.

Through this measure, the State upholds the dignity, rights, and welfare of sexual assault survivors and strengthens access to justice by ensuring that no victim is ever turned away for lack of resources or preparedness.

In view of the foregoing, the immediate passage of this measure is earnestly sought.


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**AN ACT ENSURING THE AVAILABILITY AND ACCESSIBILITY OF RAPE KITS AND
SEXUAL ASSAULT RESPONSE SERVICES IN ALL HOSPITALS AND HEALTH
FACILITIES, PROVIDING FUNDS THEREFOR, AND FOR OTHER PURPOSES**

*Be it enacted by the Senate and House of Representatives of the Philippines in Congress
assembled:*

SECTION 1. Short Title. - This Act shall be known as the “*Rape Kit Availability and
Sexual Assault Response Act of 2025.*”

SECTION 2. Declaration of Policy. - It is the policy of the State to safeguard the
dignity and rights of victims of sexual assault by ensuring timely access to medical,
psychological, and forensic services; to strengthen the capacity of the health and
justice systems to gather and preserve evidence; and to provide trauma-informed and
compassionate care to survivors.

In furtherance of Republic Act No. 8505 (Rape Victim Assistance and Protection Act of
1998), Republic Act No. 9710 (Magna Carta of Women), and other related laws, the
State shall ensure the regular availability, accessibility, and proper use of rape kits in
all government hospitals and accredited medical facilities.

SECTION 3. Definition of Terms.- For purposes of this Act:

a. Rape Kit refers to a standardized forensic evidence collection kit containing
the materials, forms, and tools necessary for the medical examination and
documentation of sexual assault.

b. Sexual Assault Response Services (SARS) refer to coordinated medical,
forensic, psychosocial, and legal assistance provided to victims of rape and
other forms of sexual violence.

c. *Women and Children Protection Unit (WCPU)* refers to a DOH-accredited facility within a hospital that provides comprehensive medical and psychosocial care for victims of abuse.

d. *Sexual Assault Response Unit (SARU)* refers to a specialized unit within hospitals responsible for administering sexual assault response services.

e. *Accredited Medical Facility* refers to any government or private hospital certified by the Department of Health (DOH) to conduct sexual assault forensic examinations.

SECTION 4. Mandatory Availability of Rape Kits.- All provincial, city, and district government hospitals, as well as DOH-retained and accredited private hospitals, shall maintain an adequate stock of rape kits at all times.

The DOH shall determine the minimum required stock per facility based on population coverage and case data, and shall issue updated guidelines annually.

The DOH, in coordination with the Department of the Interior and Local Government (DILG) and the Philippine National Police (PNP), shall ensure that at least one facility per city and municipality is equipped with rape kits and trained personnel at all times.

The DOH shall issue updated guidelines on procurement, storage, expiry monitoring, replenishment cycles, and stock auditing.

SECTION 5. Establishment of Sexual Assault Response Units (SARUs).- Every tertiary and provincial hospital shall establish a *Sexual Assault Response Unit (SARU)*, or integrate such services within existing Women and Children Protection Units (WCPUs), staffed by trained medico-legal officers, forensic nurses, social workers, and mental health professionals.

The SARU shall:

1. *Conduct immediate medical and forensic examinations;*
2. *Implement standardized chain-of-custody procedures;*
3. *Ensure proper sealing, documentation, secure storage, and timely transfer of evidence;*
4. *Provide trauma-informed counseling and psychological first aid; and*

5. *Coordinate with the PNP Women and Children Protection Desk (WCPD) and the Department of Justice (DOJ) for case referral and investigation.*

SECTION 6. Training and Capacity Building.- The DOH, in coordination with the DOJ, DSWD, PNP, and NBI shall develop and implement a standardized training and accreditation program for doctors, nurses, social workers, and police personnel on forensic evidence collection, trauma-informed care, and victim-sensitive communication.

SECTION 7. Survivor Rights and Protections.- Survivors shall be guaranteed:

1. *Informed consent for all procedures;*
2. *Confidentiality and privacy of medical and forensic information;*
3. *Free access to post-exposure prophylaxis (PEP), STI treatment, pregnancy prevention, and mental health care;*
4. *Right to decline any part of the exam;*
5. *Access to legal support and referral.*

SECTION 8. Appropriation.- The amount necessary for the initial implementation of this Act shall be charged to the appropriations of the Department of Health under the current General Appropriations Act (GAA).

Thereafter, the required funds for the continued operation of this program shall be included annually in the GAA.

Local government units (LGUs) are encouraged to allocate funds from their Gender and Development (GAD) budget to support the procurement of rape kits and maintenance of SARUs in local hospitals and health facilities. Periodic audits to ensure that exemptions are not diverted for non-agricultural use.

SECTION 9. Monitoring and Accountability.- Hospitals and accredited facilities shall submit quarterly inventory and utilization reports of rape kits and the performance of SARUs nationwide to the DOH.

Failure to maintain required stocks or submit reports without valid reason shall subject responsible officials to administrative sanctions as may be prescribed by DOH regulations.

SECTION 10. Implementing Rules and Regulations. - Within ninety (90) days from the effectivity of this Act, the DOH, in coordination with DSWD, DOJ, DILG, and PNP, shall promulgate the necessary Implementing Rules and Regulations.

SECTION 11. Separability Clause. - If any provision of this Act is declared unconstitutional, the remaining provisions shall remain in full force and effect.

SECTION 12. Repealing Clause. - All laws, presidential decrees, executive orders, and issuances inconsistent with this Act are hereby repealed or modified accordingly.

SECTION 13. Effectivity. - This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in two newspapers of general circulation.

Approved,